PATENT APPLICATION FEE DETERMINATION RECO								Application or Docket Number					7
_	PAIENI	RC		10675497									
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OF		R THAN ENTITY	1
	OTAL CLAIMS	·	12	d)				RATE	FEE	7	RATE	FEE	1
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 375.00		BASIC FEE		1
TO	OTAL CHARGE	ABLE CLAIMS	minus 20=		•			X\$ 9=		OF	7,000		1
_	DEPENDENT		minus 3 =					X42=	1	1	X84=	<del>                                     </del>	1
M	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+140=		OF		-	1
* }	* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OF	L	750	-
,	5/8/0G					OTHER		1					
	F /	(Column 1)	T	(Colum		(Column 3)	ſ	SMAL	LENTITY	OR 7	SMALL	ENTITY	ر [
ENT A		REMAINING AFTER AMENDMENT		PREVIO PAID	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		PATE	ADDI- TIONAL	r
AMENDMENT	Total	. 18	Minus	• à	Ì	· Q\	İ	X\$ 9=	FEE	OR	X\$18=	FEE.	
¥	Independent	<u> </u>	Minus	***	2	-0	ı	X42=	1	1	X84£		1
Ļ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		<u> </u>	ł
	1 1							+140=		OR	£280=	\	
9	112/06	(Column 1)		<b>10</b> -1				DDIT. FE		JOF	ADDIT, FEE		Į
8		CLAIMS		(Cotum	ST	(Column 3)	_			<b>.</b> /			
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA	l	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
MON	Total	. 18	Minus	-2	0	-0	I	X\$ 9=	1	OR	X\$18=	FEE	
AM	Independent	·	Minus	•••	3	- 0	I	X42=			X84=	\/	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								-	OR		A	
							L	+140=		OR	+280=	/ \	
		(Column 4)					A	DOIT. FEE	1	OR	TOTAL ADDIT, FEE		
		(Column 1) CLAIMS		(Colum HIGHE	n 2) St	(Column 3)							
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
2	Total	•	Minus	**		-	r	X\$ 9=	ree		X\$18=	FEE	
¥.	Independent	•	Minus	***		-	-			OR			1
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						F	X42=	<u> </u>	OR	X84=		
• #	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=		
The righest number Previously Paid For IN THIS SPACE is less than 20, enter 20.											TOTAL DDIT. FEE		
f	ne Trighest Num	ber Previously Paid	For (Total or	Independen	() is the	highest number t	loute	in the ap	propriate box	in cot	amn 1,		ł